

THE PRESIDING OFFICER. Without objection, it is so ordered.

#### COMMITTEE ON GOVERNMENTAL AFFAIRS

Mr. DOMENICI. Mr. President, I ask unanimous consent on behalf of the Governmental Affairs Committee to meet on Wednesday, April 1, 1998, at 2:30 p.m. for a hearing on the nomination of Melvin R. Wright to be Associate Judge of the Superior Court of the District of Columbia.

THE PRESIDING OFFICER. Without objection, it is so ordered.

#### COMMITTEE ON GOVERNMENTAL AFFAIRS

Mr. DOMENICI. Mr. President, I ask unanimous consent on behalf of the Governmental Affairs Committee to meet on Wednesday, April 1, 1998, at 4:00 p.m. for a business meeting and markup on legislative items and pending nominations.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### COMMITTEE ON INDIAN AFFAIRS

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Senate Committee on Indian Affairs be authorized to meet during the session of the Senate on Wednesday, April 1, 1998, at 10:30 a.m. in room 106 of the Dirksen Senate Office Building to conduct a markup on the following business: (1) the nomination of Katherine Archuleta of Denver, Colorado to serve on the Board of Directors of the Institute of American Indian and Alaska Native Culture and Arts Development; (2) S. 1279, Indian Employment, Training and Related Services Demonstration Act Amendments of 1997; and (3) S. 1797, the Reduction in Tobacco Use and Regulation of Tobacco Products in Indian Country Act of 1998. To be followed immediately by a hearing on Amendments to the Indian Gaming Regulatory Act.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### COMMITTEE ON LABOR AND HUMAN RESOURCES

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Committee on Labor and Human Resources be authorized to meet in executive session during the session of the Senate on Wednesday, April 1, 1998, at 1:30 p.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### SUBCOMMITTEE ON ANTITRUST, BUSINESS RIGHTS, AND COMPETITION

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Subcommittee on Antitrust, Business Rights, and Competition, of the Senate Judiciary Committee, be authorized to meet during the session of the Senate on Wednesday, April 1, 1998 at 10:00 a.m. to hold a hearing in room 226, Senate Dirksen Building, on: "Airline Hubs: Fair Competition or Predatory Pricing?"

The PRESIDING OFFICER. Without objection, it is so ordered.

#### SUBCOMMITTEE ON FINANCIAL SERVICES

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Subcommittee on Financial Services and Technology of the Committee on Bank-

ing, Housing, and Urban Affairs be authorized to meet during the session of the Senate on Wednesday, April 1, 1998, to conduct a hearing on identity theft.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### SUBCOMMITTEE ON NATIONAL PARKS, HISTORIC PRESERVATION, AND RECREATION

Mr. DOMENICI. Mr. President, I ask unanimous consent that the Subcommittee on National Parks, Historic Preservation, and Recreation of the Committee on Energy and Natural Resources be granted permission to meet during the session of the Senate on Wednesday, April 1, for purposes of conducting a subcommittee hearing which is scheduled to begin at 2:00 p.m. The purpose of this hearing is to receive testimony on titles I, II, III, and V of S. 1693, the Vision 2020 National Parks Restoration Act.

The PRESIDING OFFICER. Without objection, it is so ordered.

### ADDITIONAL STATEMENT

#### NATIONAL BREAST CANCER SURVIVORS DAY

• Mr. MURKOWSKI. Mr. President, today is National Breast Cancer Survivors Day and I want to take this opportunity to focus my colleague's attention on the importance of continued research and early detection efforts for this tragic disease.

Mr. President, one out of nine American women will suffer the tragedy of breast cancer. It is today the leading cause of death for women between the ages of 35 to 54.

Alaskan women are particularly vulnerable to this disease. We have the second highest rate of breast cancer in the Nation. One in 7 Alaska women will get breast cancer and tragically it is the Number One cause of death among Native Alaskan women.

Mr. President, these tragic Alaska deaths are not inevitable. Health experts agree that the best hope for lowering the death rate is early detection and treatment. It is estimated that breast cancer deaths can be reduced by 30 percent if all women avail themselves of regular clinical breast examination and mammography.

But for many Alaska women, especially native women living in one of our 230 remote villages, regular screening and early detection are often hopeless dreams.

For more than 20 years, my wife Nancy has recognized this problem and tried to do something about it. In 1974, she and a group of Fairbanks' women created the Breast Cancer Detection Center, for the purpose of offering mammographies to women in remote areas of Alaska—regardless of a woman's ability to pay.

Now, the Center uses a small portable mammography unit which can be flown to remote areas of Alaska, offering women in the most rural of areas easy access to mammographies at no

cost. Additionally, the Center uses a 43-foot long, 14 foot high and 26,000 pound mobile mammography van to travel through rural areas of Alaska. The van makes regular trips, usually by river barge, to remote areas in Interior Alaska such as Tanana.

Julie Roberts, a 42-year-old woman of Tanana, who receives regular mammographies from the mobile mammography van, knows the importance of early screening:

There's a lot of cancer here (in Tanana)—a lot of cancer. That's why it's important to have the mobile van here . . . I know that if I get checked, I can catch it early and can probably save my life. I have three children and I want to see my grandchildren.

I am proud to say that the Fairbanks Center now serves about 2,200 women a year and has provided screenings to more than 25,000 Alaska women in 81 villages throughout the state. To help fund the efforts of the Fairbanks Center, each year Nancy and I sponsor a fishing tournament to raise money for the operation of the van and mobile mammography unit. After just three years, donations from the tournament have totalled \$830,000.

Mr. President, Nancy and I are committed to raising more funds for this important program so that every woman in Alaska can benefit from the advances of modern technology and reduce their risk of facing this killer disease.

Mr. President on this day that we recognize survivors of breast cancer, I want take a moment to discuss legislation that I am cosponsoring with Senator D'AMATO to end the practices of so-called "drive-through" mastectomies.

In too many cases women who survive the trauma of a mastectomy are being forced to get out of the hospital only hours after their surgery. How can medical care professionals allow this? Simply because many insurance companies demand that the procedure of a mastectomy be considered an out-patient service."

Here's the horror that many insurance companies cause:

Nancy Couchot, a 60 year old woman had a radical mastectomy at 11:30 a.m. She was released from the hospital five hours—even though she was not able to walk or use the rest room without assistance.

Victoria Berck, had a mastectomy and lymph node removal at 7:30 a.m. 7 hours later. She was given instructions on how to empty two drains attached to her body and sent home. Ms. Berck concludes, "No civilized country in the world has a mastectomy as an out-patient service."

Mr. President that is why I am proud to co-sponsor the Women's Health and Cancer Rights Act of 1997, which would put an end to the drive-through mastectomies.

Specifically, the Act will require health insurance companies to allow physicians to determine the length of a mastectomy patient's hospital stay according to medical necessity. In other

words, the bill makes it illegal to punish a doctor for following good medical judgment and sound medical treatment.

Another important provision of this bill ensures that mastectomy patients will have access to reconstructive surgery. Scores of women have been denied reconstructive surgery following mastectomies because insurers have deemed the procedure to be cosmetic and, therefore, not medically necessary.

Mr. President, far too often breast cancer victims, who believe that they have adequate health care coverage, are horrified when they learn that reconstruction is not covered in their health plan.

In Alaska, of the 324 mastectomies and lumpectomies performed in 1996, reconstruction only occurred on 11 of the patients. That means that only 3.4% of women who have their breast removed have reconstructive surgery, compared to the national average of 23%.

Mr. President, the simple reason for this tragically low figure is simple: women can't afford the procedure.

Breast reconstruction costs average about \$5,000 for just the procedure. If hospital, physician and other costs are included—the costs escalate to around \$15,000.

Dr. Sarah Troxel, of Providence hospital, the only doctor in the Mat-Su Valley who does breast reconstruction, states the importance of reconstruction:

Women who are unable to receive reconstructive surgery, suffer from depression, a sense of loss, and need more cancer survivor counseling . . . Additionally reconstructive surgery can be preventative medicine—women who don't have reconstructive surgery often develop other medical problems or complications with their spine.

Mr. President, these issues are not partisan issues. We may have our differences regarding managing and financing health reform, but I think we all endorse accessible and affordable health care that preserves patient choice and physician discretion. Cancer does not look to see the politics of its victims.

It is my hope that we will adopt this legislation this year. ●

#### 50TH ANNIVERSARY OF THE U.S. AIR FORCE RESERVE

● Mr. LEVIN. Mr. President, I rise today to honor the United States Air Force Reserve on its 50th Anniversary, which will be celebrated across the country on April 14, 1998. The United States Air Force Reserve can trace its heritage back to the National Defense Act of 1916 which authorized a reserve corps of 2,300 officer and enlisted aviators. In 1917, the War Department established the First Reserve Aero Squadron. However, the Air Reserve was not formally established until after World War II.

On July 26, 1947, the National Security Act was signed into law by Presi-

dent Truman. This act established the United States Air Force as a separate branch of our Nation's armed forces. On April 14, 1948, just seven months later, the U.S. Air Force Reserve was established. On April 27, 1948, the Air Reserve was transferred to the Air Force. In October 1948, President Truman directed the services to revamp their reserve components. As a result, the Air Force established the position of Special Assistant to the Chief of Staff for Reserve Forces to oversee the Air Reserve. The first person to fill this position was Lt. Gen. Elwood R. Quesada. On December 1, 1948, the Air Force established the Continental Air Command (CONAC) at Mitchell Air Force Base, New York. The CONAC's mission was to administer all Air Reserve programs. After the establishment of the CONAC, the Air Reserve's mission became more coherent and diversified.

Since its humble beginnings during World War I, the Air Force Reserve has seen many dramatic changes as it has built itself into the world-class force it is today. Over the past fifty years the men and women of the Air Force Reserve have served with honor and distinction during the 1961 Berlin Crisis and the 1962 Cuban Missile Crisis, and in the major conflicts of Korea, Vietnam and in the Persian Gulf. Major General Robert A. McIntosh, the Commander of the Air Force Reserve Command, recently summarized the remarkable accomplishments of the Air Force Reserve. He said, "In five decades, we moved from a standby force, training on obsolete and war-weary airplanes, to a front-line force that is more capable than the air forces of many nations. We are a role model for keeping unique capabilities in a military framework without spending the money that a large full-time military requires."

As the Air Force Reserve celebrates its Golden Anniversary this month, we recognize that the Air Force Reserve truly does have a golden legacy. It is a legacy that we should all take time to reflect upon and honor. Regardless of any future threat our Nation may face, the Air Force Reserve will meet the challenge just as they always have. Air Force Reservists deserve the respect and gratitude of all Americans for their service and their sacrifice for our country. These volunteers exemplify daily their dedication to the ideals that make our country great.

In Michigan, the 927th Air Refueling Wing at Selfridge Air National Guard Base will celebrate the Air Reserve's 50th Anniversary. The 927th ARW flies KC-135E Stratotankers to fulfill its mission of providing Global Reach for United States air power. The 927th has a rich history of service which includes missions in Vietnam, the Persian Gulf and Bosnia. We in Michigan are very proud of the job the 927th is doing for our nation.

I know my Senate colleagues join me in celebrating the 50th Anniversary of the United States Air Force Reserve. ●

#### NATIONAL BREAST CANCER SURVIVORS' DAY

● Mrs. HUTCHISON. Mr. President, I rise today to highlight to the Senate and to the American people the importance of this day—National Breast Cancer Survivors' Day—a day commemorating breast cancer awareness and the celebration of life.

Breast cancer is the most common cancer among women of all ages. There is scarcely an American family that in some way has not been touched by this disease. In fact, it is estimated that over 180,000 women and men are diagnosed with breast cancer and over 43,000 die from the disease each year. Women have a 12 percent lifetime risk for developing breast cancer, and one in 25 women will develop the disease by age 60. While these statistics are grim, today we pause to focus our attention on the hundreds of thousands of success stories—individuals who have survived and even prospered despite breast cancer.

I salute every brave woman and man who has battled and beaten this disease. Only someone who has had cancer can really know what it is like—the fear, the doubt, and the often painful and debilitating treatments and medical procedures. But beat it they have. And to those who are still in the fight, I say: "Hang in there. You can do it, and the chances are ever greater that you will do it."

When detected early and when confined to the breast, the five-year survival rate for this disease is over 95 percent. Mr. President, this is a remarkable statistic, and represents a dramatically improved picture than that of even a few years ago. It is also important to note that, for the first time in years, the mortality rate for both Caucasian and African-American women is also declining. With continued advancements in early detection and treatment procedures, and with the growing hope that a cure might be found in a matter of years, not decades, women today certainly do have cause to celebrate.

But our work is far from done. I and many of my Senate and House colleagues are doing all we can to ensure that adequate federal resources are being allocated to research, education, and treatment of breast cancer. Through research grants and direct research conducted at the National Institutes of Health, promising leads and even occasional breakthroughs are being pursued with vigor by the best and brightest of the medical and scientific worlds. We can of course do more, and I am joining many of my colleagues on the Appropriations Committee in supporting a significant increase in the fiscal year 1999 budget for the NIH so that this important work can move forward. Put simply, we will not rest until a cure is found.

But until a cure is found, let me say to every woman in America that you are your own best ally in the fight against breast cancer. Self-exams and